

Maranatha Preschool Park

RELEASE OF STUDENT AUTHORIZATION

Student's Name *(Please Print)*: _____

Student's Class: _____

By our signatures below, we authorize Maranatha Preschool Park to release our child to the following individuals (**other than ourselves**), during the school year of 2012-1013:

1. _____ Relationship: _____
(Pickup person's signature)

_____ Phone # (____) ____ - _____
(Pickup person's printed name)

2. _____ Relationship: _____
(Pickup person's signature)

_____ Phone # (____) ____ - _____
(Pickup person's printed name)

3. _____ Relationship: _____
(Pickup person's signature)

_____ Phone # (____) ____ - _____
(Pickup person's printed name)

4. _____ Relationship: _____
(Pickup person's signature)

_____ Phone # (____) ____ - _____
(Pickup person's printed name)

I understand that my child will only be released to one of the above listed individuals. I understand that proper photo ID, verifying the signature, as given above, will be required until the teacher and staff are familiar with this individual.

♥ *Both Parents/Guardians must sign if present in the home.*

Father's/Guardian's Signature

Father's/Guardian's Printed Signature

Date

Mother's/Guardian's Signature

Mother's/Guardian's Printed Signature

Date